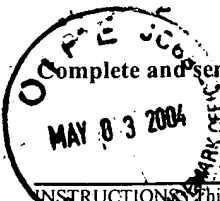


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. Further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

02/11/2004

C. John Brannon
 Woodard, Emhardt, Naughton, Moriarty and McNett
 Bank One Center/Tower
 111 Monument Circle, Suite 3700
 Indianapolis, IN 46204-5137

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Troy J. Cole	(Depositor's name)
<i>[Signature]</i>	(Signature)
April 29, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/992,320	11/19/2001	Eric R. Shute	12003-218	7358

TITLE OF INVENTION: COMBINED OPTICAL LIGHT PIPE AND PROTECTIVE ENCLOSURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/11/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CARIASO, ALAN B	2875	362-582000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

WOODARD, EMHARDT, MORIARTY .
1 McNETT & HENRY LLP
PATENT AND TRADEMARK ATTORNEYS
2 BANK ONE CENTER TOWER
3 111 MONUMENT CIRCLE, SUITE 3700
INDIANAPOLIS, INDIANA 46204-5137

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Control Devices d/b/a First Technology, Inc.

Standish, Maine

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-3030 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) *[Signature]* (Date) 4/29/04

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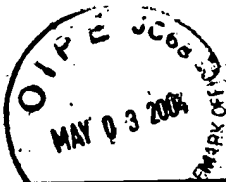
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05/04/2004 SMINASS2 00000089 09992320

01 FC:1501
 02 FC:1504

1330.00 OP
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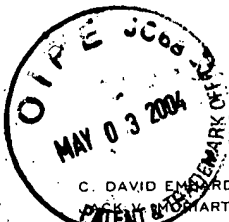


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FREE TRANSMITTAL FOR FY 2004 <small>Effective 01/01/2003. Patent fees are subject to annual revision.</small>		Complete if Known			
		Application Number	09/992,390		
		Filing Date	11/19/2001		
		First Named Inventor	Eric R. Shute		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Group Art Unit	2875		
Total Amount of Payment (\$)		Examiner Name	Cariaso, Alan B.		
1630. ⁰⁰		Attorney Docket Number	12003-218		
METHOD OF PAYMENT		FEE CALCULATION (continued)			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None Order		3. ADDITIONAL FEES			
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 23-3030 Deposit Account Name: Woodard, Emhardt, Moriarty, McNett & Henry LLP					
The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application, excluding the payment of issue fees <input checked="" type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility Filing Fee	
1002	340	2002	170	Design Filing Fee	
1003	530	2003	265	Plant Filing Fee	
1004	770	2004	385	Reissue Filing Fee	
1005	160	2005	80	Provisional Filing Fee	
SUBTOTAL (1) (\$)					
2. EXTRA CLAIM FEES					
Total Claims	-20** =	Extra Claims	Fee From Below	X	Fee Paid
Independent Claims	-3** =			X	
Multiple Dependent					
Large Entity	Small Entity	Fee Description			
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)					
*or number previously paid, if greater. For Reissues, see above					
				Other Fee (specify)	Publication Fee
				* Reduced by Basic Filing Fee Paid	
				SUBTOTAL (3) (\$)	1630. ⁰⁰

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April 29, 2004

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The enclosed check No. 43717 covers the issue fee and publication fee payments in the amount and manner set forth below. Please charge any additional fees which may be due or credit any overpayments to deposit account No. 23-3030.

- 1. Issue fee due on Eric R. Shute application, Ser. No. 992,320 entitled COMBINED OPTICAL LIGHT PIPE AND PROTECTIVE ENCLOSURE- see attached sheet.

\$ 1330.00

- 2. Publication fee due on patent serial No. 992,320 – see attached sheet

300.00

TOTAL BALANCE TO BE PAID:

\$ 1630.00

Sincerely,

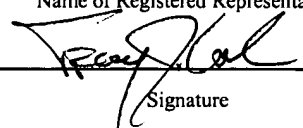
Kari K. Woehler

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Enclosures

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Troy J. Cole

Name of Registered Representative



Signature

April 29, 2004

Date of Signature